BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

5150-52200

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			63				I	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			63 minus 20=		. 43			X\$ 9=		OR	X\$18=	774,00
IND	EPENDENT CL	AIMS	7 minus 3 =		. 4			X40=		OR	X80=	320.00
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter '					r "0" in c	olumn 2	•	TOTAL		OR	TOTAL	1804,00
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	.5	Minus	·· W	3	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 12 NTATION OF M	Minus	***	TCLAIM	- 3		X40=		OR	X	4300
<u> </u>	· ·	VIATION OF M	OLTIFLE DEF	LINDLIN	TOLATIVI		J	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL A 114	=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		ָ לַ	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	IT OL AND	=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=	**	OR	+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									ł	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE												